

HAWAII STATE ETHICS COMMISSION

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Web site: www.hawaii.gov/ethics

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(Type or Print Clearly)

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PART I LOBBYIST			
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(City)	(State)		(Zip Code)
Honolulu	HI		96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			o lobby) TELEPHONE
Slovin & Ito, LLP			539-0400
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PART II ORGANIZATION		
NAME OF ORGANIZATION YOU I	TELEPHONE 703-684-1110 FAX 703-684-7912 EMAIL	
MultiState Associates Inc.		
MAILING ADDRESS (Street)		
515 King Street, Suite 300		
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Alexandria	VA	22314
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Carrie E. Castro		703-684-1110
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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	 Intergovernmental Relations International Affairs 	Tourism & Recreation		
Consumer Protection & Commerce	☐ Hawaiian Affairs	☐ Labor & Employment	Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & WaterUse Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	☐ Housing	☐ Public Safety & Corrections			
PART IV CERTIFICATION	N OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
_ Christi	Kt		1/18/13		
	(Signature of Lobbyist)		(Ďate)		
	<u>.</u>				
PART V AUTHORIZATION TO LOBBY					
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Paul W. Hallman	President, MultiState Associates, Inc.				
NAME OF ORGANIZATION (if ap	plicable)		TELEPHONE		
MultiState Associates Inc	703-684-1110				
MAILING ADDRESS (Street)			FAX 703-684-7912		
515 King Street, Suite 30	00		EMAIL phallman@multistate.com'		
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I hereby authorize the above pamed person to engage in lobbying activities on behalf of the undersigned.					
(16)/10	l Va		1/11/13		
1 /W/VY			1111/11/15		

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(Date)

(Signature of Authorizing Officer or Person Represented)